DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE CENTERS FOR DISEASE CONTROL AND PREVENTION OFFICE OF COMMUNICATION ATLANTA, GEORGIA 30333

REQUEST FOR TASK ORDER PROPOSAL

Date Issued: June 29, 2005 Date Response Due: July 22, 2005

Questions are to be submbitted via email to Helen Mitchell, hjm3@cdc.gov by July 12, 2005

Proposals are to be submitted via email to Helen Mitchell, him3@cdc.gov by July 22, 2005

Request for Task Order Proposal (RFTOP) NO.:256 CDC 40

Title: National Communication Plan (Development, Implementation, and Evaluation)

Contract reference: This Request for Task Order Proposal is consistent with the purposes for which the NIH Public Information and Communication Services (PICS) contracts for health communication services were awarded. This RFTOP includes tasks described in the contract as Task 5 Outreach / Promotion.

Page Suggestion: Each proposal may be up to 30 pages, double spaced and no less than a 12 size font. Attachments may not exceed 20 pages and may contain staff bios/cvs.

Budget format suggestion: Each proposal must contain an itemized budget for each deliverable in this RTOP. If subcontractors will be used, itemized budgets for the subcontractors must be provided as well. The budget should be for all tasks requested in the RTOP. This project will be incrementally. Contractors are requested to provide a budget for each phase of the project.

Funding Range:

- □ Under \$100,000
- ✓ Over \$100,000 but less then \$300,000
- Over \$300,000 but less than \$500,000
- Over \$500,000 but less than \$700,000
- Over \$700,000 but less than \$1,000,000
- □ Over \$1,000,000

Background:

As part of the Centers for Disease Control and Prevention (CDC), the National Center for Injury Prevention and Control is dedicated to preventing injuries and reducing the impact when they do occur. Using the same proven public health methods used to prevent infectious diseases; CDC's Injury Center approaches the full spectrum of injury and conducts research on injury (including

violence) prevention, acute injury care, and rehabilitation. The center translates science into effective program and policies to prevent injuries and improve outcomes.

Over the past five years, CDC's Injury Center has completed formative identity and branding research on injury prevention and control and CDC's Injury Center. Using the results of this work and other data and information available, the center is ready to develop a national communication plan to increase awareness of injuries as a major public health problem and the message that injuries can be prevented. The plan would also be used to increase awareness of CDC's responsibility and work in preventing injuries (and violence).

Description of work:

This project is to develop an overarching National Injury Communication Plan. This project would create an approach in which CDC's Injury Center's mission and communication messages would come together to form a focused identity to increase awareness about injuries and violence that would lead to their prevention and reduce their severity if they did occur.

Task 1. Background and Research

The contractor will review existing research and information on communicating injury and violence to the public. This includes review of sources that identify specific populations at risk for injuries. Using recent HealthStyles data to be obtained by CDC and any other relevant data, the contractor will create profiles for these audience segments. The contractor will use demographic, geographic, psychographic and other segmentation strategies to identify groups large enough or who have enough influence to warrant a national effort. The profiles will be used to determine specific audiences to target and the appropriate communication channels and identify decision-makers and agents of change within the audiences who can promote change. The profiles will also direct the messages developed as a result of National Injury Communication Plan. The contractor will also review the literature on effect sizes for various communication outcomes in order to provide a recommendation(s) for each audience segment's achievable and measurable communication objective(s) in the evaluation portion of the National Injury Communications Plan. The contractor will also need to identify and detail any current national campaigns on injury or violence-related topics in the United States.

Task 2. Development of the Plan

The plan is to define how to create the most effective messages using the most effective channels to increase awareness of injuries and violence as a major health problem and component of health care costs in the United States in specific populations and provide information on how certain types of injury and violence can be prevented. The plan is to be submitted to CDC as a WORD electronic file and as a print document. Other formats may be acceptable but CDC must agree to receipt of the plan in writing before the additional format is used to create the plan. CDC has the final decision on when the plan is considered finished and complete. CDC will

provide that decision in writing to the contractor. The plan along with any other electronic or print materials created in or for the development of the plan are the property of CDC.

The Plan will:

- A. Define specific audiences at risk for specific unintentional injuries and violence that warrant a national effort.
- B. Provide communication objectives for each of the selected target audience segments.
- C. Define proven and appropriate communications channels to reach the identified audiences. The plan will need to discuss the strengths and weaknesses of each identified channel.
- D. Discuss the preferred tone, style and appeal of messages for each audience; any potential negative effects of messages; and any specific messages, tones, or appeals that resonate with the defined audiences.
- E. Define the most appropriate settings and communication channels for reaching each communication objective.
- F. Provide a priority listing of all proven and appropriate communication channels for each defined audience.
- G. Identify and prioritize decision-makers and agents of change within the audiences who can promote change.
- H. Provide the unique role of each communication channel and how they can be coordinated for optimum impact: advertising, public relations, Internet, direct mail, development of proposals, etc...
- I. Provide a breakdown of costs to use each identified channel.
- J. Provide a list of potential partners (including public, non-profit, and private entities) to reach identified audiences through the identified channels.
- K. Describe what resources each partner would be able to provide.
- L. Provide a priority list of partners for each identified audience and/or channels.
- M. Provide a comprehensive timeline that includes all components of the National Injury Communication Plan.
- N. Will have an evaluation component that will describe the methodology and timelines to measure the impact of the messages and channels identified in the specific audiences.
- O. Will contain a recommendation(s) for each identified audience achievable and measurable communication objective.
- P. Will include methodology and timelines for determining which communication messages and activities are selected by partners for implementation, what influences these selections, and the magnitude of partners' delivery efforts to receipt of program messages and behavioral responses by target audiences.

Items from CDC appropriate for preparation of proposals:

Information on CDC's Injury Center can be found at www.cdc.gov/injury

Item from CDC appropriate for task completion:

Upon award of the contract, the contractor will be provided with reports and additional materials from past Injury Center communication research and work. Some materials will be provided electronically, others will be in print.

NCIPC will provide technical assistance to the contractor on injuries and violence in the form of information, background, contacts, guidance on difficult topic areas, and answers to inquiries.

DELIVERABLES

DATE REQUIRED

•	Initial Meeting	2 weeks after award of contract
•	Every other week meetings by conference call throughout period of performance	Every other week after the initial meeting
•	Weekly update reports provided by email to technical monitor throughout period of performance	At the end of each work week
•	Report of Research Results	3 months after award of contract
•	Meeting to discuss Research Report	2 weeks after receipt of Research Results Report
•	First Draft of National Injury Communication Plan	6 months after award of contract
•	Meeting to discuss First Draft	3 weeks after receipt of first draft
•	Final version of National Injury Communication Plan in print and Electronic formats.	12 months after award of contract
	Follow-up and consultation	Last 4 months of contract

Period of Performance:

The performance period begins with date of award and the overall end date is November 30, 2006.

Special Clearances: *Check all that apply:*

OMB	Production Clearances:
Human Subjects	524 (concept)
Privacy Act	524a (audiovisual)
	615 (printing)

Evaluation Criteria:

A. Award: This task order will be awarded to the contractor whose proposal is considered to be the most advantageous to the Government, price and other factors identified below considered. (Indicate which will be more important in your evaluation; price or technical factors, or if they will be treated equally).* The Government will not make an award at a significantly higher overall cost to the Government to achieve only slightly superior performance.

B. Technical Evaluation:

Technical evaluation for this RFTOP are as follows:

	Points or relative
Criteria	Value of criteria
	4.0
Technical Approach	40
Staffing and Management	15
Similar Experience	15
Recommendations	30

Technical Approach:

Contractors are to provide a discussion of their technical approach for providing the services required for this task order.

This criteria will be evaluated according to the soundness, practicality, and feasibility of the contractor's technical approach for providing the services required for this task order.

Staffing and Management:

Contractors are to provide (1) a staffing plan that demonstrates their understanding of the labor requirements for this task order; and (2) a management plan that describes their approach for managing the work, to include subcontract management if applicable.

This criteria will be evaluated according to the soundness, practicality, and feasibility of the offeror's staffing and management plans for this task order.

Similar Experience:

Provide information reflecting the contractor's organizational capacity for projects similar in complexity and scope.

This criteria will be evaluated to determine appropriate experience of assigned personnel.

Recommendations:

Contractors are to provide ideas and/or suggestions about creative and/or innovative ways to accomplish either the processes or products described in this task. This criteria will be evaluated by examining the creative ideas offered and the rationale that supports the ideas presented.

C. Cost Evaluation: A cost analysis of the cost proposal shall be conducted to determine the reasonableness of the contractor's cost proposal.

Proposed Technical Monitor:

Sandra Bonzo National Center for Injury Prevention and Control M/S K-65 770-488-4228 (voice) 770-488-1667 (fax) seb2@cdc.gov

Project Officer: Brittney A. Spilker, Division of Creative Services